PTO/SB/17 (12-04v2)
Approved for use through 07/31/2008, OMB 0851-0032
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Fees pursuant to the Co	18).	Complete if Known							
FEE TRANSMITTAL				pplication Number	09/755,02	7 REC	CEIVED		
for FY 2005			Fi	ling Date	January 8,	2001 THAL	FAX CENTER		
			Я	rst Named Inventor	Jan Forsio	w AUG	2 8 2006		
Applicant claims small entity status. See 37 CFR 1.27			E	xaminer Name	Jeffrey C.				
TOTAL AMOUNT OF PAY	OAVMENT.		A	rt Unit	2143				
TOTAL AMOUNT OF	PAIMENI	(\$) 200	A	torney Docket No.	000254.00	012			
METHOD OF PAYMENT (check all that apply)									
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):									
Deposit Account	Deposit Accour	nt Number: 19-0733		Deposit Account	t Name: Banı	ner & Witco	off, LTD.		
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		l fee(s) or underpayme	nts of fee(s) 🔀 Credit a	ny overpaymer	nts	•		
Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public, Credit card information should not be included on this fixm. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION	ization on Pio	-2036.							
1. BASIC FILING, SE	APCH AND	EYAMINATION SEE	<u> </u>						
i. basic riemo, se	FILING		SEARCI	H FEES	EXAMINA	TION ITEES			
A	F (A)	Small Entity		Small Entity		mall Entity	F D-14 (A)		
Application Type Utility		Fee(\$)	Fee(\$)	<u>Fee(\$)</u>	Fee(\$)	Fee(:i)	Fees Paid (\$)		
Design	300 200	150 100	500 100	250 50	200 130	100 65			
Plant	200	100							
Reissue			300	150	160	80			
Provisional	300 200	150 100	500 0	250 0	600 0	300 0			
2. EXCESS CLAIM F		100	U	U	U	•	Cmall Entity		
Fee Description	EES						Small Entity		
Each claim over 20	(Including R	eicauec)				<u>Fee (S)</u> 50	<u>Fee (\$)</u> 25		
Each independent			•			200	100		
Multiple dependen						360	180		
Total Claims	Extra (Claims Fee(\$)	<u>Fe</u>	e Paid (\$)		<u>Multiple</u>	Dependent Claims		
20 or	HP=	x	=			Fee (\$)	Fee Paid (\$)		
HP = highest number	r of total claims p	aid for, if greater than 20.							
Indep. Claims	Extra C	laims Fee(\$)	<u>Fe</u>	e Paid (\$)					
<u>5</u> -3 or i	-	x <u>100</u>		00					
		claims paid for, if greater t	an 3.						
3. APPLICATION SIZE FEE									
If the specification and drawings exceed IOO sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR L16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
100 = /50 = (round up to a whole number) x =									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge):									
Other (e.g., late filing surcharge):									
SUBMITTED BY									
Signature	(e	2000		Registration No. (Attorney/Agent)	58,216	Te ephone	202.824.3000		
Name (Print/Type)	Chunhsi An	dy Mu				D€le	August 28, 2006		

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21002/018

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	. •	Application Number	09	755,027				
TRANSMITTA	Fillng Date	Ja	January 8, 2:001					
FORM	First Named Invento	or Ja	n Forslow					
	Art Unit		2143					
(to be used for all correspondence after	Examiner Name	Je	ffrey C. P	v/u				
Total Number of Pages in This Submit		Attorney Docket Nur	mber 00	0254.000	12			
	ENCLO	SURES (check all that	appiy)					
Fee Transmittal Form	Drawing(s			After Allow	vance Communication to TC			
Fee Attached	Licensing	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences				
Amendment / Reply	Petition	Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
After Final		Petition to Convert to a Provisional Application			Proprietary Information			
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address			Status Letter			
Extension of Time Request	☐ Terminal	Terminal Disclaimer			Other Enc osure(s) (please identify below):			
Express Abandonment Request		Request for Refund			eal			
	CD, Number of CD(s)							
Information Disclosure Statement	Remarks	dscape Table on CD	_		·			
Certified Copy of Priority Document(s)	[FIGHTALES]							
Reply to Missing Parts/								
Incomplete Application								
Reply to Missing Parts under 37 CFR1.52 or 1.53	,							
SIC	NATURE OF	APPLICANT, ATTORI	NEY, OR AC	GENT				
Firm		Banner & Witcoff, LTD.						
Signature	Ce	Ceron						
Printed Name	Chunhsi Ar	Chunhsi Andy Mu						
Date	August 28, 2006 Reg. No.			3,216				
CERTIFICATE OF TRANSMISSION/MAILING								
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Signature	00	~						
Typed or printed name Chunh			Date	August 28, 2008				

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FAX NO.:	TOTAL NO. OF PAGES: (including cover sheet)				
571-273-8300	18				
	OUR REFERENCE (C/M) NO.: 000254.00012				
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COMMENTS:

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- 1. Facsimile Certificate of Transmission (on this cover sheet)
- 2. Transmittal form
- 3. Fee Transmittal
- 4. Petition for Extension of Time
- Notice of Appeal
- 6. Amendment

Chunhsi Andy Mu, Reg. No. 58,216

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